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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

SEC Mail Processing Section

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC USE ONLY Prefix Serial

OMB APPROVAL

July 31, 2008

3235-0076

16.00

OMB Number:

Estimated average burden

hours per response:

Expires:

189008 UNIFORM LIMITED OFFERING EXEMPTION	DATE RECEIVED
Washington, DC	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
GS TACS Active Continuous (International), LLC: Limited Liability Company U	
	Section 4(6) ULOE
Type of Filing: ☐ New Filing ☑ Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
GS TACS Active Continuous (International), LLC	— 08056217 –
Address of Executive Offices (Number and Street, City, State, Zip Code) Te	
32 Old Slip, New York, New York 10005	(212) 902-1000
Address of Principal Business Operations (Number and Street, City, Stark Dec (SSED)	elephone Number (Including Area Code)
Brief Description of Business JUL 2 1 2008	
To operate as a private investment fund.	_
THOMSON REUTER	S
Type of Business Organization	
	other (please specify):
□ business trust □ limited partnership, to be formed Li	mited Liability Company
Actual or Estimated Date of Incorporation or Organization: Month Year	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation State: CN for Canada; FN for other foreign jurisdiction of Incorporation or Organization:	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director \square General Partner and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Goldman Sachs Asset Management, L.P. (the Issuer's Managing Member) Business or Residence Address (Number and Street, City, State, Zip Code) 32 Old Slip, New York, NY 10005 Check Box(es) that Apply: ☐ Beneficial Owner ☑ Executive Officer ☐ Director General Partner and/or ☐ Promoter Managing Partner Full Name (Last name first, if individual) Chropukva, Gary Business or Residence Address (Number and Street, City, State, Zip Code) 32 Old Slip, New York, NY 10005 ☐ Promoter Executive Officer Director General Partner and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) loffe, Len Business or Residence Address (Number and Street, City, State, Zip Code) 32 Old Slip, New York, NY 10005 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director General Partner and/or Managing Partner Full Name (Last name first, if individual) Jones, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 32 Old Slip, New York, NY 10005 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer Director General Partner and/or Managing Partner Full Name (Last name first, if individual) Litterman, Robert B. Business or Residence Address (Number and Street, City, State, Zip Code) 32 Old Slip, New York, NY 10005 General Partner and/or Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☑ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Mulvihill, Donald Business or Residence Address (Number and Street, City, State, Zip Code) 32 Old Slip, New York, NY 10005 Check Box(es) that Apply: ☐ Promoter Beneficial Owner Executive Officer Director General Partner and/or Managing Partner Full Name (Last name first, if individual) Wianecki, Karl D. **Business or Residence Address** (Number and Street, City, State, Zip Code) 32 Old Slip, New York, NY 10005 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Partner and/or Managing Partner Full Name (Last name first, if individual)

(Number and Street, City, State, Zip Code)

Business or Residence Address

		<u>.</u>		B. IN	FORMAT	ION ABO	UT OFFI	ERING				
									•		Yes	No
1: Has th	he issuer solo	d, or does th						-				⊠
					in Append		2, if filing t	inder ULOI	i.			
2. What i	is the minimu fund may a	n investment ccept subsc	that will be a criptions fo	r lesser am	n any individe ounts in the	ual? e sole discr	etion of the	Managing	Member.		\$	0,000*
3. Does	the offering	permit join	t ownership	of a single	unit?						Yes ☑	No □
comm If a pe or star	the informanission or sinerson to be lites, list the need or dealer,	nilar remun sted is an a ame of the	eration for s ssociated pe broker or de	solicitation erson or age caler. If me	of purchase int of a brok ore than five	rs in connector or dealer (5) person	ction with s registered s to be liste	ales of secu with the SE	rities in the C and/or wi	offering. th a state		
	e (Last name 1, Sachs & C		lividual)			•						
	or Residence Street, Nev			Street, Cit	y, State, Zip	Code)						
Name of .	Associated E	Broker or De	ealer		•			•				
	Which Perso "All States"										🗹 A	ll States
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Full Name	e (Last name	first, if ind	lividual)	-				F 4			•	
												
Name of A	Associated E	Iroker or De	ealer									
	Which Perso "All States"										🗆 Al'	l States
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i an ivani	e (Last Harre	. 11131, 11 1110	iividuarj									
Business	or Residence	Address (ì	Number and	Street, City	y, State, Zip	Code)						
Name of	Associated E	Broker or De	ealer						<u>.</u>			
	Which Perso											All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	ITNI	(TX)	IUTI	[TV]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\Pi\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$_	0	\$	0
	Other (Specify) Limited Liability Company Units	\$	539,624,455	\$	539,624,455
	Total	\$	539,624,455	\$	539,624,455
	Answer also in Appendix, Column 3, if filing under ULOE.		_		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Nouskan		Aggregate
			Number Investors		Dollar Amount of Purchases
	Accredited Investors		225	\$	539,624,455
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve				
	(12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		Type of		Dollar Amount
	Type of offering		Security		Sold
	Rule 505	_	N/A	\$.	N/A
	Regulation A	_	N/A	\$.	N/A
	Rule 504	_	N/A	\$.	N/A
	Total	_	N/A	\$.	N/A
tl tl	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$	0
	Legal Fees		☑	\$	172,407
	Accounting Fees			\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify) legal and miscellaneous			\$	0
	Total		\square	\$	172,407
				•	

. C. OFFERING PRICE, NUMBER OF INVEST	rors, expi	ENS	ES A	ND USE OF P	ROCE	EDS	
 b. Enter the difference between the aggregate offering price given i - Question 1 and total expenses furnished in response to Part C - difference is the "adjusted gross proceeds to the issuer." 	Question 4.a.	Thi	s		\$_		539,452,048
Indicate below the amount of the adjusted gross proceeds to the issue to be used for each of the purposes shown. If the amount for any purpose furnish an estimate and check the box to the left of the estimate payments listed must equal the adjusted gross proceeds to the issuer to Part C - Question 4.b. above.	rpose is not kr total o	nown of the	1, e		_		
				Payments to Officers, Directors, & Affiliates			Payments To Others
Salaries and Fees			\$_	0	_ 🗆	\$_	0
Purchase of real estate			\$ _	0	_ 🗆	\$ _	0
Purchase, rental or leasing and installation of machinery and equipme	ent		\$_	0	_ 🗆	\$_	0
Construction or leasing of plant buildings and facilities			\$_	0		\$_	0
Acquisition of other businesses (including the value of securities in this offering that may be used in exchange for the assets or sec another issuer pursuant to a merger)	urities of		\$	0		\$	0
Repayment of indebtedness			\$ \$	0		* - \$	0
Working capital		_	\$	0	-	\$ _ \$	0
Other (specify): Investment capital			\$	0	- ☑	\$	539,452,048
Column Totals		Image: control of the	\$	0	- 2	\$_	539,452,048
Total Payments Listed (column totals added)	539,452,048						
D. FEDERAL	SIGNATUR	E_			···		
The issuer has duly caused this notice to be signed by the undersigne following signature constitutes an undertaking by the issuer to furnish to ts staff, the information furnished by the issuer to any non-accredited in	the U.S. Secur	rities	and]	Exchange Commi	ssion, u		
uer (Print or Type) S TACS Active Continuous nternational), LLC	$\sqrt{}$			Date July 15, 2008			
me of Signer (Print or Type) Chard Cundiff Authorized Person	Гуре)			· · · · · · · · · · · · · · · · · · ·			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

